



## Aboriginal Health : Self directed learning package

GP registrars are required to complete an education package on aboriginal health and cultural awareness. One alternative to fulfilling the requirements of the aboriginal health component is to complete the self directed learning package outlined below. This style of learning may suit some GP registrars but in general attending a face to face interactive workshop on aboriginal health at an Aboriginal Health Service would provide a more optimal learning experience.

### Part 1. GPTTs Population Health Module on line -

View Case 3 Aboriginal Health which is found at:

<http://gptt.com.au/Population%20Health/Health%20Promotion.html>

Reflect on the *Issues to consider* indicated in red. Have a quick look at the relevant links in blue. You may wish to discuss this case with your supervisor

### Part 2. Aboriginal health videos

These videos were produced by Aboriginal Nations Australia. They were funded by the Commonwealth Department of Health and Ageing in Sept 2002 and remastered to DVD in 2007 by the Royal Australasian College of Surgeons in collaboration with The Royal Australian and New Zealand College of Obstetricians and Gynaecologists. They have been published online by The RACGP November 2007.

Four Aboriginal Health videos are available titled *Insight into Aboriginal Community Control, Aboriginal Health Worker, Cross Cultural Awareness* and *Doctors in Aboriginal Health* **online on the RACGP website** at:

<http://www.racgp.org.au/aboriginalhealthunit/video#1>

A fast broadband connection is recommended to view these videos. If you are using Internet Explorer 7, XP service pack 2 or Windows Vista you may have to give permission for your browser to access the files.

It is recommended that you view all 4 videos and reflect on the key issues listed under the video clip

### Part 3. Aboriginal health epidemiology

The **AIHW/ABS report: The health and welfare of Aboriginal and Torres Strait Islander peoples 2008** report released in April 2008 by the Australian Bureau of Statistics (ABS) and Australian Institute of Health and Welfare (AIHW) provides a comprehensive overview of the health and welfare of Australia's Aboriginal and Torres Strait Islander population. It presents the latest information on population demographics, housing circumstances, disability and carers, health status, and the provision, access and use of health and community services. Some of the links between education and health and between selected risk factors and health are also explored.

Action : Have a brief look at the report and reflect on the following key points:

The report shows significant **falls in mortality rates** for **Indigenous babies** between 1991 and 2005 in Western Australia, South Australia and the Northern Territory, the only jurisdictions for which data were available for the full period and of sufficient quality to report.

The report also found **improvements in the socio-economic status** of Aboriginal and Torres Strait Islander people including:

- An increase in Year 12 completion rates from 20% in 2001 to 23% in 2006
  - A decrease in the unemployment rate from 20% in 2001 to 16% in 2006
  - An increase in the rates of home ownership for Indigenous households from 31% in 2001 to 34% in 2006.

Despite these gains, the health status of Indigenous Australians has shown little improvement in recent years, and remains considerably below that of non-Indigenous Australians:

- Indigenous adults are twice as likely as non-Indigenous adults to report their health as fair or poor
- Hospitalisation rates are higher for Indigenous Australians, particularly for conditions that are potentially preventable such as diabetes and kidney disease
  - The mortality rates of Indigenous people in 2001-2005 were almost three times the rate for non-Indigenous people in Queensland, Western Australia, South Australia and the Northern Territory, the only jurisdictions for which coverage of Indigenous deaths was deemed sufficient to report.

Other findings from the report include:

- Indigenous people were half as likely to complete Year 12 as non-Indigenous people.
- Indigenous adults were more than twice as likely as non-Indigenous adults to smoke regularly.
- More than half of Indigenous people were overweight or obese.
- Indigenous people face barriers in accessing health services, in particular primary health care. To view the report, click onto <http://www.aihw.gov.au/publications/ihw/hwaatsip08/hwaatsip08.pdf>

#### Part 4. Aboriginal Health & Cultural Awareness MCQs

Circle one answer for each MCQ. The answers are at the end, but try not to have a peek till you have finished.

1. What are not regarded as cultural activities for Tasmanian Aborigines?
  - a) Shell necklace making
  - b) Mutton bird industry
  - c) Dot painting
  - d) Basket weaving
  - e) Aboriginal festivals eg NAIDOC week
  
2. People who identify as Tasmanian Aboriginals. Which one answer is not correct?
  - a) Can receive a number of financial incentives from Centrelink
  - b) Can identify as Aboriginal simply by ticking a box on Centrelink forms
  - c) Can self identify that they are Aboriginal on Census forms
  - d) Can only receive access to Tasmanian Gov Aboriginal services if they can show their connection to the local Tasmanian Aboriginal community
  - e) Can access MBS item numbers for Aboriginal Health Assessments, performed by their GP, by self identifying that they are Aboriginal
  
3. In regards to the red part of the Aboriginal flag . Which statement is false
  - a) Signifies blood spilt
  - b) Signifies the red ochre used for celebrations
  - c) Signifies the red earth
  - d) Occupies the lower part of the flag
  - e) Signifies the setting sun
  
4. In regards to elders in the Tasmanian Aboriginal community. Which statement is true
  - a) They are determined by age, with all people reaching 80 being termed an elder
  - b) Are elected at annual gatherings of the Tasmanian Aboriginal community
  - c) Michael Mansell is the probably best known Tasmanian Aboriginal elder
  - d) Women are rarely seen as elders
  - e) Elders are recognised by the Aboriginal community for their work in standing up for Aboriginal issues and are addressed with respect

5. Historical events affect the health of contemporary Aboriginal people. Which statement is **most correct**?
- a) There is little evidence to support this statement
  - b) It is important that 'a line is drawn in history' and Aboriginal people move on and don't become continually affected by the past
  - c) Aboriginal people are powerless to improve their situation due to their focus on damaging historical events
  - d) Having equality is an important aim for the improvement of health and social conditions of aboriginal people
  - e) Due to the damage of historical events Aboriginal people need equitable access to services to improve their lives
6. What statements are not likely to be offensive to Aboriginal people in Tasmania?
- a) You don't look Aboriginal ?
  - b) Are you an Aboriginal person?
  - c) How much of your blood is Aboriginal?
  - d) Are you indigenous?
  - e) Do you identify as being an ATSI?
7. What are not ways to build up trust with Aboriginal people in the consultation?
- a) Listening to their story
  - b) Taking into account cultural differences
  - c) Speaking slowly and avoiding jargon
  - d) Being direct and asking enquiring questions if the patient appears shy
  - e) Demonstrating you have an understanding of the impact of colonisation on Aboriginal people
8. In comparing Aboriginal health to non Aboriginal people in Australia. Which statement is incorrect
- a) There is a 17 yr difference in life expectancy
  - b) Aboriginal adults are as likely as non-Aboriginal adults to self report their health as fair or poor
  - c) The difference in life expectancy is much less in urban environments
  - d) There are less elderly in the Aboriginal population and very few in aged care facilities
  - e) Around 60% of Aboriginal people identified as smokers in the 2002 survey
9. Statistics in the Tasmanian Aboriginal population. Which statement is most correct
- a) 1% of the Tasmanian population are Aboriginal by 2006 Census
  - b) 3% of the Tasmanian population are Aboriginal by 2006 Census
  - c) 7% of the Tasmanian population are Aboriginal by 2006 Census
  - d) Around 6000 people use the Aboriginal Health Service in Tasmania
  - e) Non -Aboriginal spouses are not eligible to access the Aboriginal Health Service

10. In regards to Aboriginal Health Workers. Which is incorrect
- Are Aboriginal community members
  - Are first point of contact for accessing Aboriginal health services
  - Work in a variety of roles being flexible in meeting the health needs of the community
  - Often do the work of other health workers (eg sexual health, drug and alcohol ) when those workers are away or not able to be accessed
  - Training (TAFE or community colleges) is only available on the mainland at present
11. Drivers for the increased incidence of smoking do not include:
- cultural and social identity (Smoking is part of being Aboriginal)
  - high levels of addiction
  - common way of managing emotions (smoking helps social distress)
  - seen as being 'cool'
  - less access to quit smoking programs
12. Social issues affecting the Aboriginal community may stem from: Which one is incorrect
- Dispossession of land
  - Cultural oppression
  - Too many hand outs
  - Forcible removal of children
  - Denial of identity
13. Concerning Tasmanian Aboriginals. Which is false
- Truganini was the last Tasmanian Aboriginal
  - Palawa is the traditional name for the Tasmanian Aboriginal community
  - The last Aboriginal survivor of the Oyster Cove settlement was Fanny Cochrane-Smith
  - The majority of Tasmanian Aboriginal people are descendants of Aboriginal women stolen by sealers and taken to Cape Barren in the 1790s
  - Have had 12 parcels of land returned to them by the State Government since 1995
14. Community programs run by the Aboriginal health service work best when: Which answer is incorrect
- The Aboriginal community identifies its own needs
  - Relationship between member of the program become more important than the information itself
  - When they are accompanied by changes in public policy
  - When external experts run the entire program- as they receive more respect
  - Financial barriers are overcome eg some medication are funded

Answers to MCQ

1 c

2 a

3 e

4 e

5 e

6 b

7 d

8 b (twice as likely) **AIHW/ABS report: The health and welfare of Aboriginal and Torres Strait Islander peoples 2008**

9 b

10 e

11 d

12 c

13 a

14 d

Please complete the evaluation from below when you have completed this 4 part package.

